

Diarrhea and Diseases Spread Through Feces

Definition of Diarrhea: Stools that contain blood or mucous, or are watery or less formed, occur more often than usual, and are not contained by diapers or toilet use.

Fever: Persons over 4 months old: greater or equal to 101° F oral, 102° F rectal, 100° F under arm Children less than 4 months old: greater or equal to 101° F rectal, 100° F under arm

Child care center attendees and workers with diarrhea should be excluded from the center when experiencing diarrhea.

Child care workers and attendees may return to the center when diarrhea ends, without further lab tests, for the following infections or conditions:

Infection or Condition (For more information, contact Local Public Health Agency)	Are these Infections/Conditions Reported to the Local Health Department	Special Information
Diarrhea of unknown origin	No	Recommend medical evaluation and laboratory tests to determine the cause of diarrhea.
Amebiasis (Entamoeba histolytica)	Yes	No further information
Campylobacter	Yes	No further information
Clostridium difficile	No	No further information
Cryptosporidium	Yes	No further information
Giardia	Yes	No further information
Norwalk virus (calicivirus)	No	No further information
Pinworm	No	Itching in the rectal area, disturbed sleep and irritability are common Exclusion is usually not necessary unless the person had diarrhea.
Rotavirus	No	No further information
Salmonella (non-typhoid)	Yes	No further information
Yersinia	Yes	No further information

Child care workers and attendees may return to the center when diarrhea ends *and special requirements are fulfilled* for the following infections or conditions:

Infection or Condition	Are these Infections/Conditions Reported to the Local Health Department	Special Information
E. coli O157:H7	Yes	Child may return after 2 negative stool cultures OR at the discretion of the local health agency
Hepatitis A	Yes Report immediately by phone	Recommend the person receive a medical evaluation when the skin or the white part of the eyes has a yellow tint and the urine is darker than normal. Exclude if diarrhea is present or blood test indicated current Hepatitis A infection Child may return 14 days after the onset of illness or 10 days after yellow tint is observed or at the discretion of the local health agency
Shigella	Yes	Child may return after 2 negative stool cultures OR at the discretion of the local health agency
Typhoid fever (Salmonella Typhi)	Yes	Child may return after 3 negative stool cultures OR at the discretion of the local health agency

Division of Public Health, Bureau of Communicable Diseases, 7/02

REMINDER: Very good handwashing after using the bathroom, before each meal and after playing outside helps prevent these diseases!!

Air-borne

May be used in place of Communicable Disease Wall Chart

These diseases are spread through nose and throat discharges like sneezing and coughing or contact with saliva.

Fever: Persons over 4 months old: greater or equal to 101° F oral, 102° F rectal, 100° F under arm Children less than 4 months old: greater or equal to 101° F rectal, 100° F under arm

Child care workers and attendees should be excluded from the center following a medical diagnosis of these infections or conditions:

Infection or Condition (For more information, contact Local Public Health Agency)	Are these Infections/Conditions Reported to the Local Health Department	Exclude When Common Signs are Evident	Special Information
Chickenpox (varicella) Vaccination required by Division of Public Health	Yes (by number only)	Itchy fluid-filled blisters, rash, mild fever	Child may return when lesions have dried. Fluid in the blisters can spread the illness Clinical or laboratory diagnosis needed for exclusion.
"Cold sores" Herpes	No	Sores in and around the mouth result in drooling and fever.	Child may return when fever and drooling are gone and sores are drying. Children with "cold sores" need not be excluded.
Fifth disease (Parvovirus B-19)	No	"Slapped-cheek" appearance, fever	Child may return when fever is gone. Pregnant workers with health concerns should contact their local health department. May also be spread by blood.
Hand, foot and mouth disease (coxsackie virus)	No	Fluid-filled blisters in the mouth, on the palm of the hands or the sole of the feet, mild fever	Child may return when fever is gone and blisters improve. Pay special attention to infants who may stop suckling when infected. May also be spread in feces.
HiB (Haemophilus influenza type B) Vaccination required by Division of Public Health	Yes Report immediately by phone	HiB infection can cause many signs and illnesses, the most serious illness being meningitis (an inflammation of the lining of the brain and spinal cord). Meningitis causes headache, stiff neck and fever. HiB in blood or spinal fluid is reason for exclusion.	Child may return when physically able to participate in day care activities. Consult with the local health department for other recommendations. This disease can only be diagnosed by lab tests.
Influenza	No	Fever, muscles and body aches, cough, sore throat,	May return when fever is gone.
Measles Vaccination required by Division of Public Health	Yes Report immediately by phone	Rash that contains white/blue spots, eye irritation, fever, cough, sneezing and stuffy nose	Child may return 5 days after the rash appears. This disease can only be diagnosed by lab tests.

Division of Public Health, Bureau of Communicable Diseases, 7/02

Air-borne cont'd

May be used in place of Communicable Disease Wall Chart

These diseases are spread through nose and throat discharges like sneezing or coughing

Fever: Persons over 4 months old: greater or equal to 101° F oral, 102° F rectal, 100° F under arm Children less than 4 months old: greater or equal to 101° F rectal, 100° F under arm

Child care workers and attendees should be excluded from the center following medical diagnosis of these infections or conditions:

Infection or Condition (For more information, contact Local Public Health Agency)	Are these Infections/Conditions Reported to the Local Health Department	Exclude When Common Signs are Evident	Special Information
Meningococcal disease (Neisseria meningitidis)	Yes Report immediately by phone	Meningitis (an inflammation of the lining of the brain and spinal cord) that results in headache, stiff neck, fever, and rash. N. meningitidis in the blood or spinal fluid is reason for exclusion	Child may return when physically able to participate in child care activities. Consult with the local health department for other recommendations. This disease can only be diagnosed by lab tests.
Meningitis, bacterial or viral (non HiB or meningococcal)	Yes	Exclusion is usually not necessary if the person is able to participate in child care activities. Meningitis (an inflammation of the lining of the brain and spinal cord) results in headache, stiff neck and fever	Child may return when fever is gone and they are physically able to participate in child care activities. This disease can only be diagnosed by lab tests.
Mumps Vaccination required by Division of Public Health	Yes	Fever, swelling of salivary glands.	Child may return 10 days after swelling appears. This disease can only be diagnosed by lab tests.
Roseola (sixth disease)	No	High fever, rash	Child may return when fever is gone. Possibly spread through saliva, however the exact means of spread are unknown.
RSV (Respiratory Syncytial Virus)	No	Fever, "rattley" cough, increased irritability, fatigue	Child may return when fever is gone.
Strep throat (Strep pyogenes)	No	Fever, sore throat	Child may return 24 hours after antibiotic therapy has started.
Tuberculosis (TB)	Yes	Weight loss, cough, and chills. Night sweats usually happens with adults	Child may return when the individual is not infectious. Consult with local public health. This disease can only be diagnosed by lab tests.
Whooping cough (pertussis) Vaccination required by Division of Public Health	Yes Report immediately by phone	A cough that worsens and results in a characteristic "whoop", vomiting	Child may return 6 days after antibiotic therapy is started or 3 weeks after the cough started.

Division of Public Health, Bureau of Communicable Diseases, 7/02

Contact

These diseases are spread through contact with infected (infested) objects that may include; skin, eyes, or non-living objects such as toys, dishes, and clothing. Diseases spread by throat and nasal discharges are not included in this section.

Fever: Persons over 4 months old: greater or equal to 101° F oral, 102° F rectal, 100° F under arm Children less than 4 months old: greater or equal to 101° F rectal, 100° F under arm

Child care workers and attendees should be excluded from the center following medical diagnosis of these infections or conditions:

Infection or Condition (For more information, contact Local Public Health Agency)	Report to the Local Health Department	Exclude When Common Signs are Evident	Special Information
Impetigo (Staph or Strep)	No	Rash with blisters that may contain clear fluid or pus.	Child may return when lesions clear or 24 hours after antibiotic therapy has started. Over the counter medications are not acceptable. May be spread by fluid or pus in blisters?
Lice; head or body (pediculosis)	No	Lice are observed on the scalp or on the body. Center policy will determine the exclusion of children with nits.	<u>Head lice</u> : Child may return after first effective treatment and no lice are observed. <u>Body lice</u> : Child may return after changing and washing infested clothing Machine wash clothing, bedding or cloth toys at 129° F water and dry at highest setting. Store clothes or toys that can't be washed in a sealed plastic bag for 10 days
Pink eye (conjunctivitis)	No	Redness of the inner lid of the eye with white/yellow discharge from the eye.	Child may return when white/yellow drainage stops.
Ringworm (tinea)	No	Scalp: Itchy patchy areas of dandruff-like scaling with possible hair loss and fluid-filled blisters Body: Itchy, flat circular-shaped lesion If lesions are covered there is no need for exclusion. If lesions cannot be covered there is no need for immediate exclusion. The child may remain in the center for the remainder of the day and then begin antifungal treatment	Child may return when anti-fungal treatment has been started and the lesions improve. If infected lesions are covered and there is no risk of spread, the child may return. It is not necessary to wear hats or caps for scalp ringworm after treatment has been started. Over-the counter medication is <u>NOT</u> an acceptable treatment unless advised by a physician.
Scabies	No	Itchy raised areas, rash	Child may return after treatment is completed. Machine wash clothing, bedding or cloth toys at 129° F water and dry at highest setting. Store clothes or toys that can't be washed in a sealed plastic bag for 10 days.

Blood-Associated

May be used in place of Communicable Disease Wall Chart

These diseases are spread through contact with blood from an infected person. Other body fluids that may spread these diseases are listed.

Child care workers and attendees should be excluded from the center following clinical diagnosis of these infections or conditions:

Infection or Condition (For more information, contact Local Public Health Agency)	Report to the Local Health Department	Exclude When Common Signs are Evident	Special Information
AIDS or HIV Infection	Yes	Exclusion is usually <u>not</u> necessary. Exclusion of infected children with certain behavior problems (biting, scratching, skin infections, or bleeding problems) should be decided on an individual basis. Exclusion of persons who get other infections because he/she has AIDS/HIV should be based on the recommendations for those other infections.	May also be spread by semen. This disease can only be diagnosed by lab tests.
Hepatitis B Vaccination required by Division of Public Health	Yes	When the skin or the white part of the eyes has a yellow tint. Exclusion of children with certain behavior problems (biting, scratching, skin infections, or bleeding problems) that may increase the risk of the disease being spread should be decided on an individual basis.	Recommend a medical evaluation when yellow tint is observed. Child may return when physically able to participate in child care activities. May be spread by semen or vaginal fluid. This disease can only be diagnosed by lab tests.
Hepatitis C	Yes	When the skin or the white part of the eyes has a yellow tint. Exclusion of children with behavior problems (biting, scratching, skin infections, or bleeding problems) that may increase the risk of the disease being spread should be decided on an individual basis.	Recommend a medical evaluation when yellow tint is observed. Child may return when physically able to participate in child care activities. May be spread by semen or vaginal fluid. This disease can only be diagnosed by lab tests.

Division of Public Health, Bureau of Communicable Diseases 7/02

Other reasons for exclusion from a Child Care Center

1. Refer to current Family Child Care regulations (HFS-45) and Group Child Care regulations (HFS-46) for additional exclusion requirements
2. Any illness that prevents the child from participating comfortably in program activities.
3. Illness that results in a greater need for care that staff can provide without compromising the health and safety of other children.
4. The illness has conditions that may indicate a possible severe illness, e.g., persistent crying, lethargy, difficulty breathing, or increased irritability.
5. Any illness with a fever.